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Practitioner's Docket No. 00-434

PATENT

**COMBINED DECLARATION AND POWER OF ATTORNEY**(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,  
CONTINUATION, OR C-I-P)

As a below named inventor, I hereby declare that:

**TYPE OF DECLARATION**

This declaration is of the following type:

(check one applicable item below)

- ☐ original.  
☐ design.

NOTE: With the exception of a supplemental oath or declaration submitted in a reissue, a supplemental oath or declaration is not treated as an amendment under 37 CFR 1.312 (Amendments after allowance). M.P.E.P. § 714.16, 7th Edition.

- ☐ supplemental.

NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application, do not check next item; check appropriate one of last three items.

- ☒ national stage of PCT.

NOTE: If one of the following 3 items apply, then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR C-I-P.

NOTE: See 37 C.F.R. § 1.63(d) (continued prosecution application) for use of a prior nonprovisional application declaration in the continuation or divisional application being filed on behalf of the same or fewer of the inventors named in the prior application.

- ☐ divisional.  
☐ continuation.

NOTE: Where an application discloses and claims subject matter not disclosed in the prior application, or a continuation or divisional application names an inventor not named in the prior application, a continuation-in-part application must be filed under 37 C.F.R. § 1.53(b) (application filing requirements — nonprovisional application).

- ☐ continuation-in-part (C-I-P).

**INVENTORSHIP IDENTIFICATION**

**WARNING:** If the inventors are each not the inventors of all the claims, an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

**TITLE OF INVENTION**

POLAR POLYMERIC COATING

00501700 080200

(complete (a), (b), or (c))

NOTE: "The following combinations of information supplied in an oath or declaration filed on the application filing date with a specification are acceptable as minimums for identifying a specification and compliance with any one of the items below will be accepted as complying with the identification requirement of 37 CFR 1.63:

"(2) name of inventor(s), and attorney docket number which was on the specification as filed;

"(3) name of inventor(s), and title which was on the specification as filed."

(b) ☐ was filed on \_\_\_\_\_, as ☐ Serial No. 0 / \_\_\_\_\_  
or ☐ \_\_\_\_\_  
and was amended on \_\_\_\_\_ (if applicable).

NOTE: "The following combinations of information supplied in an oath or declaration filed after the filing date are acceptable as minimums for identifying a specification and compliance with any one of the items below will be accepted as complying with the identification requirement of 37 CFR 1.63:

“(B) serial number and filing date;

*“(D) title which was on the specification as filed and reference to an attached specification which is both attached to the oath or declaration at the time of execution and submitted with the oath or declaration; or*

*"(E) title which was on the specification as filed and accompanied by a cover letter accurately identifying the application for which it was intended by either the application number (consisting of the series code and the serial number, e.g., 08/123,456), or serial number and filing date. Absent any statement(s) to the contrary, it will be presumed that the application filed in the PTO is the application which the inventor(s) executed by signing the oath or declaration."*

(c) ☒ was described and claimed in PCT International Application No. PCT/CH99/00050, filed on February 5, 1999 and as amended under PCT Article 19 on \_\_\_\_\_ (if any).

(Reg. 1.82-12/99 Pub. 605)



**PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS  
(6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION  
AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119(a)-(d)**

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
Switzerland	281/98	05/02/98	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

**CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S)**  
(34 U.S.C. § 119(e))

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

PROVISIONAL APPLICATION NUMBER

FILING DATE

\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CLAIM FOR BENEFIT OF EARLIER US/PCT APPLICATION(S)**  
**UNDER 35 U.S.C. § 120**

- ☐ The claim for the benefit of any such applications are set forth in the attached ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CONTINUATION-IN-PART (C-I-P) APPLICATION.

(Declaration and Power of Attorney [1-1]—page 4 of 7)

**ALL FOREIGN APPLICATION(S), IF ANY, FILED MORE THAN 12 MONTHS  
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION**

NOTE: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage, or (2) a continuation, divisional, or continuation-in-part, then also complete ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR C-I-P APPLICATION for benefit of the prior U.S. or PCT application(s) under 35 U.S.C. § 120.

**POWER OF ATTORNEY**

I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

(list name and registration number)

Robert H. Bachman (19,374), Gregory P. LaPointe (28,395),  
Barry L. Kelmacher (29,999) and George A. Coury (34,309)

(check the following item, if applicable)

- ☐ I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.
- ☐ Attached, as part of this declaration and power of attorney, is the authorization of the above-named practitioner(s) to accept and follow instructions from my representative(s).

NOTE: "Special care should be taken in continuation or divisional applications to ensure that any change of correspondence address in a prior application is reflected in the continuation or divisional application. For example, where a copy of the oath or declaration from the prior application is submitted for a continuation or divisional application filed under 37 CFR 1.53(b) and the copy of the oath or declaration from the prior application designates an old correspondence address, the Office may not recognize, in the continuation or divisional application, the change of correspondence address made during the prosecution of the prior application. Applicant is required to identify the change of correspondence address in the continuation or divisional application to ensure that communications from the Office are mailed to the current correspondence address. 37 CFR 1.63(d)(4). \* § 601.03, M.P.E.P., 7th Edition.

**SEND CORRESPONDENCE TO**

**DIRECT TELEPHONE CALLS TO:**  
(Name and telephone number)

☒ Address

Bachman & LaPointe, P.C.  
900 Chapel Street, Suite 1201  
New Haven, CT 06510-2802

Robert H. Bachman  
(203) 777-6628

☐ Customer Number \_\_\_\_\_

(complete the following if applicable)

Since this filing is a ☐ continuation ☐ divisional there is attached hereto a Change of Correspondence Address so that there will be no question as to where the PTO should direct all correspondence.

(Declaration and Power of Attorney [1-1]—page 5 of 7)

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**DECLARATION**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**BEST AVAILABLE COPY****SIGNATURE(S)**

NOTE: Carefully indicate the family (or last) name, as it should appear on the filing receipt and all other documents.

NOTE: Each inventor must be identified by full name, including the family name, and at least one given name without abbreviation together with any other given name or initial, and by his/her residence, post office address and country of citizenship. 37 CFR § 1.63(a)(3).

NOTE: Inventors may execute separate declarations/oaths provided each declaration/oath sets forth all the inventors. Section 1.63(a)(3) requires that a declaration/oath, *inter alia*, identify each inventor and prohibits the execution of separate declarations/oaths which each sets forth only the name of the executing inventor. 62 Fed. Reg. 53,131, 53,142, October 10, 1997.

**Full name of sole or first inventor**

EVA

MARIA

MOSER

(GIVEN NAME)

(MIDDLE INITIAL OR NAME)

FAMILY (OR LAST NAME)

Inventor's signature Eva Maria MoserDate 10-27-2000 Country of Citizenship SWITZERLANDResidence Gütschstrasse 32, CH-8122 Binz, Switzerland CHXPost Office Address SAME AS ABOVE**Full name of second joint inventor, if any**

(GIVEN NAME)

(MIDDLE INITIAL OR NAME)

FAMILY (OR LAST NAME)

Inventor's signature \_\_\_\_\_

Date \_\_\_\_\_ Country of Citizenship \_\_\_\_\_

Residence \_\_\_\_\_

Post Office Address \_\_\_\_\_

**Full name of third joint inventor, if any**

(GIVEN NAME)

(MIDDLE INITIAL OR NAME)

FAMILY (OR LAST NAME)

Inventor's signature \_\_\_\_\_

Date \_\_\_\_\_ Country of Citizenship \_\_\_\_\_

Residence \_\_\_\_\_

Post Office Address \_\_\_\_\_

(Declaration and Power of Attorney [1-1]—page 6 of 7)

1-00  
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(check proper box(es) for any of the following added page(s)  
that form a part of this declaration)

- ☐ **Signature** for fourth and subsequent joint inventors. Number of pages added \_\_\_\_\_

\* \* \*

- ☐ **Signature** by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added \_\_\_\_\_

\* \* \*

- ☐ **Signature** for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added \_\_\_\_\_

\* \* \*

- ☐ Added page for **signature** by one joint inventor on behalf of deceased inventor(s) where legal representative cannot be appointed in time. (37 CFR 1.47)

\* \* \*

- ☐ Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (C-I-P) application.

☐ Number of pages added \_\_\_\_\_

\* \* \*

- ☐ Authorization of practitioner(s) to accept and follow instructions from representative.

\* \* \*

(if no further pages form a part of this Declaration,  
then end this Declaration with this page and check the following item)

- ☒ This declaration ends with this page.

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